

Docket no. IACP0015USA

As a below named inventor, I hereby declare that:

"COMPUTER POINTING DEVICE EMPLOYING A MAGNETIC FIELD SOURCE AND
MAGNETIC FIELD SENSORS "

+ The specification for the above entitled invention is filed herewith.

_____The specification for the above entitled invention was filed previously with
application serial number: _____ Filing Date: _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the invention disclosed in this application in accordance with Title 37, Code of Federal Regulations, Section 1.56 (a). I further acknowledge the duty in any continuation-in-part application to disclose to the Patent and Trademark Office all information known to be material to the patentability of the invention disclosed in this application, as defined in 1.56, which became available to me between the filing date of the prior application and the filing date of this application.

PRIORITY CLAIM

1 There is no claim of priority.

 Claim of priority is based on the following:

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney to prosecute this application and to transact all related business in the Patent and Trademark Office:

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued hereon.

Date: 2002.5.23 Cheng Shing Lai
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and Residence: Taipei Hsien, Taiwan, R.O.C.
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Date: 2002.5.23 Sa-Yee Wen
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Date: 2002.5.23 Wei-Tung Ko
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Date: _____
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Date: _____
Printed Name: _____
Post Office Address: _____
and Residence: _____
Citizen of: _____